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Bib Data Sheet

CONFIRMATION NO. 5437

| | | | | |
|------------------------------------|-------------------------------------------------|---------------------|-------------------------------|----------------------------------------|
| SERIAL NUMBER 10/083,100 | FILING DATE 02/26/2002 RULE | CLASS 455 | GROUP ART UNIT 2681 | ATTORNEY DOCKET NO. 476-2095 |
|------------------------------------|-------------------------------------------------|---------------------|-------------------------------|----------------------------------------|

APPLICANTS

Martin Smith, Chelmsford, UNITED KINGDOM;
Dean Kitchener, Brentwood, UNITED KINGDOM;
Sonya Amos, Bishops Stortford, UNITED KINGDOM;
Dawn Power, Bishops Stortford, UNITED KINGDOM;
Dong-Sheng Yu, Ottawa, CANADA;
Ming Jia, Ottawa, CANADA;
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Peiying Zhu, Kanata, CANADA;
Wen Tong, Ottawa, CANADA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/27/2002

| | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWING 20 | TOTAL CLAIMS 25 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

Lee, Mann, Smith, McWilliams, Sweeney & Ohlson
P.O. Box 2786
Chicago, IL 60690-2786

TITLE

Radio communications device

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|-----------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| FILING FEE RECEIVED 830 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |